

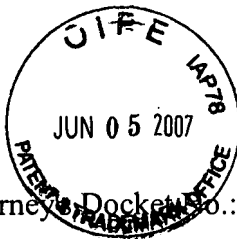
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|---|---|------------------------|------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application No. | 10/678,899 |
| | | Filing Date | October 2, 2003 |
| | | First Named Inventor | Joseph Consolini |
| | | Art Unit | 1734 |
| | | Examiner Name | Edwards, Laura Estelle |
| Total Number of Pages in This Submission | 9 | Attorney Docket Number | 6601P033 |

| ENCLOSURES (check all that apply) | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return Postcard</div> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Neal Berezny, Reg. No. 56,030 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature | <i>Neal Berezny</i> |
| Date | 5-31-07 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
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| I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | |
| Typed or printed name | Carrie Boccaccini | | |
| Signature | <i>Carrie Boccaccini</i> | Date | 5/31/07 |



17

Attorney's Docket No.: 006601.P033

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Joseph Consolini et al.

Examiner: Laura Estelle Edwards

Application No.: 10/678,899

Art Unit: 1734

Filed: October 2, 2003

For: RESIST RECOVERY METHOD

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Examiner:

In response to the Office Action dated March 26, 2007, Applicant respectfully requests that the above-identified application be amended as follows and that the following remarks be considered:

FIRST CLASS CERTIFICATE OF MAILING

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Carrie Boccaccini

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Signature

Date

Inventor: Joseph Consolini
Application No.: 10/678,899

Examiner: Laura Estelle Edwards
Art Unit: 1734